

INVENTOR INFORMATION

Inventor One Given Name:: LALITHA
Family Name:: AGNIHOTRI
Postal Address Line One:: 5 Loudon Drive
Postal Address Line Two:: Apt. 6
City:: Fishkill
State or Province:: New York
Country:: USA
Postal or Zip Code:: 12524
City of Residence:: Fishkill
State or Province of Residence:: New York
Country of Residence:: USA
Citizenship Country:: India
Inventor Two Given Name:: James David
Family Name:: SCHAFFER
Postal Address Line One:: 101 Edgehill Drive
City:: Wappingers Falls
State or Province:: New York
Country:: USA
Postal or Zip Code:: 12590
City of Residence:: Wappingers Falls
State or Province of Residence:: New York
Country of Residence:: USA
Citizenship Country:: USA
Inventor three Given Name: Nevenka
Family Name: Dimitrova
Postal Address Line One: 3148 Gomer Street
City: Yorktown Heights
State of Province: New York
Country: USA
Postal or Zip Code: 10598
City of Residence: Yorktown Heights
State or Province of Residence: New York
Country of Residence: USA
Citizenship Country: Macedonia
Inventor four Given Name: Thomas
Family Name: McGee
Postal Address Line One: 58 Steuben Road
City: Garrison
State or Province: New York
Country: USA
Postal or Zip Code: 10524
City of Residence: Garrison
State or Province of Residence: New York
Country of Residence: USA
Citizenship Country: USA
Inventor five Given Name: Sylvie
Family Name: Jeannin
Postal Address Line One: c/o 345 Scarborough Road
City: Briarcliff Manor
State or Province: New York
Country: USA
Postal or Zip Code: 10510-2099

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 05514
Fax:: (212) 218-2200

APPLICATION INFORMATION

Title Line One:: A METHOD, APPARATUS, AND PROGRAM FOR EVOLVING
Title Line Two:: ALGORITHMS FOR DETECTING CONTENT IN
Title Line Three:: INFORMATION STREAMS

Total Drawing Sheets:: 6
Informal Drawings?:: Yes
Application Type:: Utility
Docket Number:: US010699
Secrecy Order in Parent Appl.?:: No

REPRESENTATIVE INFORMATION: 05514

Representative Customer Number:: 5514

PRIOR FOREIGN APPLICATIONS

Priority Claimed:: No

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